



GENESEE COUNTY PLANNING BOARD REFERRALS NOTICE OF FINAL ACTION

GCDP Referral ID

T-01-STA-11-25

Review Date

11/13/2025

Municipality

STAFFORD, T.

Board Name

PLANNING BOARD

Applicant's Name

Robert G. Mullen

Referral Type

Site Plan Review

Variance(s)

Description:

Site Plan Review to construct a 768 sq. ft. (32 x 24 ft.) storage barn for an existing automotive business.

Location

5599 Main Rd. (NYS Rt. 5), Stafford

Zoning District

Commercial (C) District

PLANNING BOARD RECOMMENDS:

APPROVAL WITH MODIFICATION(S)

EXPLANATION:

The required modification is that the storage and disposal of all new and used waste oils, lubricants, fuels, coolants and other hazardous materials shall be conducted in a manner consistent with all applicable State and Federal laws. With this required modification, the proposed storage barn should pose no significant county-wide or inter-community impact.

Director

November 13, 2025

Date

If the County Planning Board disapproved the proposal, or recommends modifications, the referring agency shall NOT act contrary to the recommendations except by a vote of a majority plus one of all the members and after the adoption of a resolution setting forth the reasons for such contrary action. Within 30 days after the final action the referring agency shall file a report of final action with the County Planning Board. An action taken form is provided for this purpose and may be obtained from the Genesee County Planning Department.

SEND OR DELIVER TO:

GENESEE COUNTY DEPARTMENT OF PLANNING
3837 West Main Street Road
Batavia, NY 14020-9404
Phone: (585) 815-7901

DEPARTMENT USE ONLY:

GCDP Referral # T-01-STA-11-25



*** GENESEE COUNTY ***
PLANNING BOARD REFERRAL

RECEIVED

By the Genesee County Dept. of Planning at 3:50 pm, Nov 05, 2025

Required According to:

GENERAL MUNICIPAL LAW ARTICLE 12B, SECTION 239 L, M, N

(Please answer ALL questions as fully as possible)

1. REFERRING BOARD(S) INFORMATION

Board(s) Stafford Planning Board

Address 8903 Route 237

City, State, Zip Stafford, NY 14143

Phone (585) 344 - 1554 Ext. _____

2. APPLICANT INFORMATION

Name Robert G. Mullen

Address 9168 Batavia-Stafford Townline Road

City, State, Zip Batavia, NY 14020

Phone (585) 409 - 0100 Ext. _____ Email bob@eastcoastspeed.com

MUNICIPALITY: ☐ City ☒ Town ☐ Village of Stafford

3. TYPE OF REFERRAL: (Check all applicable items)

- ☐ Area Variance
☐ Use Variance
☐ Special Use Permit
☒ Site Plan Review

- ☐ Zoning Map Change
☐ Zoning Text Amendments
☐ Comprehensive Plan/Update
☐ Other: _____

- Subdivision Proposal
☐ Preliminary
☐ Final

4. LOCATION OF THE REAL PROPERTY PERTAINING TO THIS REFERRAL:

A. Full Address 5599 Main Rd. (NYS Rt. 5), Stafford

B. Nearest intersecting road Prole Rd.

C. Tax Map Parcel Number 8.-1-8

D. Total area of the property 1.027 Acres Area of property to be disturbed 0.017 acres

E. Present zoning district(s) Commercial

5. REFERRAL CASE INFORMATION:

A. Has this referral been previously reviewed by the Genesee County Planning Board?

☒ NO ☐ YES If yes, give date and action taken _____

B. Special Use Permit and/or Variances refer to the following section(s) of the present zoning ordinance and/or law

C. Please describe the nature of this request _____

Site plan approval for construction of a 32' x 24' storage barn for dry storage of parts, tires, and related materials for the automotive business that is located on the property, under Section 182-22 A.(2)(b) of the Town Code.

6. ENCLOSURES – Please enclose copy(s) of all appropriate items in regard to this referral

- ☒ Local application
☒ Site plan
☐ Subdivision plot plans
☒ SEQR forms

- ☐ Zoning text/map amendments
☐ Location map or tax maps
☒ Elevation drawings
☐ Agricultural data statement

- ☐ New or updated comprehensive plan
☒ Photos
☒ Other: Aerial photo of site

7. CONTACT INFORMATION of the person representing the community in filling out this form (required information)

Name William R. VanAlst Title Planning Board Chairman Phone (585) 233 - 6006 Ext. _____

Address, City, State, Zip 9107 Roanoke Road, Stafford, NY 14143 Email wvanalst@rochester.rr.com

From: [William VanAlst](#)
To: [Felipe Oltramari](#)
Cc: [Gene Sinclair \(code@townofstafford.org\)](#)
Subject: 5599 Main Road Site Plan, Stafford, NY
Date: Wednesday, November 5, 2025 2:50:16 PM
Attachments: [image003.png](#)
[image002.png](#)
[5599 Main Road Referral Application - County Planning Board.pdf](#)
[Site Plan Application Mullen 5599 Main Road.pdf](#)
[Site Plan 5599 Main Road Recd. 10.31.25.pdf](#)
[5599 Main Road SEAF Part 1.pdf](#)

Caution! This message was sent from outside your organization.

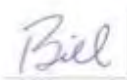
[Allow sender](#) | [Block sender](#) | [Report](#)

Hi, Felipe-

Sending along a referral for site plan review for construction of a storage barn at 5599 Main Road, at the NE corner of Prole Road. Bob Mullen wants to construct a 24'x32' building next to his vehicle-frame business building, which was allowed by Special Use Permit back in 2001. It is located in a commercial zone. We felt that since the building is for storage only, we could process this as a site plan rather than a modification of his Special Use Permit. He currently has several trailer units that he stores parts and materials in, so this building would take the place of those.

Attached is the County Referral Form, the application with views of the proposed building & photos of the existing site, a site plan, , and the SEAF Form Part 1. I am waiting to receive an updated site plan that shows proposed side and rear setback distances from the property lines, and will forward that when I receive it.

Please place this on the County Planning Board's agenda for your November meeting. Call me if you have any questions, or need any additional information.



William R. VanAlst, P.E.

Vice President

700 West Metro Park • Rochester • NY • 14623

Tel: 585.272.7310 ext. 661 • Fax: 585.272.0159

Cell: 585.233.6006

wvanalst@larsen-engineers.com

www.larsen-engineers.com

Updated Site Plan Received 11/6/2025
FAO



Serve the Client. Benefit the Community. Protect the Environment.

Please consider the environment before printing this email.

This message is intended only for the use of the individual(s) or entities to which it is addressed and may contain information that is privileged, confidential, and/or exempt from disclosure by applicable law or court order. If the reader of this message is not the intended recipient, or the employee or agent responsible for delivering the message to the intended recipient, you hereby are notified that any use, dissemination, distribution, or copying of this communication is strictly prohibited. If you have received this communication in error, please notify us immediately by return e-mail, and delete the original message from your system. Thank you.

NOTICE: The information contained in this message and any documents, files, previous messages or other information attached are intended for the recipient only and may be

OWNER

APPLICANT (If other than owner)

Name : Robert G. Mullen

Name :

Address : 9168 Batavia/Starbuck

Address :

Batavia, N.Y. 14020 TWLH Rd.

Telephone # : 585-429-0100

Telephone # :

1. Request to the Board of Appeals to appeal the Zoning Enforcement Officer's decision to DENY ☐ GRANT ☐ an application for a Zoning Permit Application Number _____ Dated _____.

2. APPLICATION FOR : Use Variance ☐ Special Use Permit ☐
Site Plan Review ☒ Interpretation ☐

3. Address of Project Site : 5599 East Main Rd.
Tax Map Number : _____ Zoning District : Commercial

4. Has a previous appeal been filed pertaining to this parcel? No ☐
Yes ☐ If yes, list Appeal No. N/A Date _____ Purpose of Request : _____

5. Justification for Request : General Response _____

Site Plan Review For Small Storage Building
Commercial Zone See Attached

A more SPECIFIC RESPONSE should accompany this application on separate sheet(s) of paper. Address each of the statements listed on the back of the GOLD sheet which pertain to your specific appeal.

The Applicant shall submit with this appeal, appropriate supporting materials including, but not limited to, site plans, elevations, traffic circulation diagrams, neighborhood land use maps and any other material that will assist the Board in making a determination regarding this request.

CERTIFICATION : I hereby certify that I have read and examined this application and supporting attachments and know the same to be true and correct. All provisions of laws and ordinances covering this type of work or use will be complied with whether specified herein or not. The granting of an appeal does not presume to give authority to violate or cancel the provisions of any other state or local ordinance or law regulating construction or performance of construction and/or use.

X See Original Application for Permit

Applicant's Signature

Owner's Signature (if other than applicant)

PROVISIONS of ZONING LAW APPEALED:

FEE COLLECTED: Date 10-16-25

OFFICE USE ONLY

1. ☐ Article _____ Section _____
Subsection _____ Paragraph _____
state reason: Schedule A
Site Plan Review Applicant For
JSA
2. ☐ Schedule A - state reason: See Above

TOTAL FEE \$ 75.00 Check # 1705

ACTION TAKEN: Date _____
☐ Approved ☐ Rejected
By: _____ Chairman
☐ Board of Appeals ☐ Town Board
☐ Planning Board

OWNER

APPLICANT

Name: Robert G. Mullen

Address: 9168 Batavia Stafford Townline Rd.

Batavia NY 14020

Phone #: 585 409 0100

Name:

Address:

Phone #:

APPLICATION DATE: 9/18/2025

PROJECT SITE LOCATION: 5599 East main St Rd

Tax Map # (TMP) 81-8

Check w/ local Assessor or Tax Bill

INSTRUCTIONS: Using a ball point pen please fill out this application as completely as possible. Submit additional Attachment(s) [listed on the back of the Gold sheet] and the completed application to the Z.E.O./C.E.O. This application is NON-TRANSFERRABLE and is NOT a permit to commence work.

1 Application for Use: RESIDENTIAL ☐ ; COMMERCIAL ☒ ; INDUSTRIAL ☐ ; RECREATIONAL ☐ ; AGRICULTURAL ☐ ; SITE PLAN ☐

2 Permit for: NEW CONSTRUCTION ☒ ; ADDITION ☐ ; ALTERATION ☐ ; REPAIR ☐ ; CHANGE IN USE ☐

3 Is this parcel? A corner lot: YES ☒ NO ☐ ; Have a Driveway permit? YES ☒ NO ☐ . In a Water District? YES ☒ NO ☐ .

4 List the DIMENSIONS of the parcel: x and/or TOTAL PARCEL AREA (Acres) 1

5 What are the parcel setbacks [Ft.] from the project. FRONT 80 ; REAR 65 & SIDE yards (a) 75 (b) . Attachment A

6 Total % of coverage of ALL buildings on the parcel (including the proposed project): TOTAL %

7 Does this project require County Health Department approval? NO ☒ YES ☐ , If yes, submit Attachment F.

8 Is this parcel properly Land Separated/Subdivided? NO ☒ YES ☐ , If yes, provide documentation.

9 Do you give the Town VALID CONSENT to do the required inspections? YES ☒ NO ☐ , If no, what procedures?

10 Name of Architect/Engineer Telephone #

Address

11 Name of Contractor(s) Telephone #

Address

12 Estimated cost of the project? 15,000 [Substantiation may be required]

13

PROPOSED PROJECT	HEIGHT	LENGTH	WIDTH	SQ. FT.
HOUSE (1st floor)				
OTHER (or 2nd floor)				
GARAGE				
ACCESSORY BUILDING	8	32	24	768
SWIMMING POOL				
DECK				
COMMERCIAL/INDUSTRIAL				
TOTAL SQ. FT.				768

14 Total Dwelling units:

15 Will electric be installed? YES ☐ NO ☒ .

16 Describe the proposed project and use:

Dry Storage No Electric No Water

Submitted For Site Plan Review 10-16-25

***** SIGNATURE BLOCK *****

I hereby certify that I have read the instructions and examined this application and supporting attachments and know the same to be true and correct. All provisions of laws and ordinances covering this type of work or use will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel provisions of any other state or local law or ordinance regulating construction or performance of construction.

Signature - OWNER 9/18/2025

Signature - APPLICANT (if different than owner)

OFFICE USE ONLY

Action taken by Zoning Enforcement Officer: APPROVED ☐ DENIED ☐ , Action necessary: SPECIAL USE: ☐ SITE PLAN: ☐

Article Section Subsection Paragraph Briefly Describe: SCHEDULE A: ☐ VARIANCE: Area ☐ Use ☐

Attachments Required: See Attachments

Z.E.O./C.E.O. Signature

Date of Action: 9-16-25

Zoning District: COMM

Wetlands YES NO

Flood Plain YES NO

F Zoning \$ 75.00

E Building \$

E Late \$

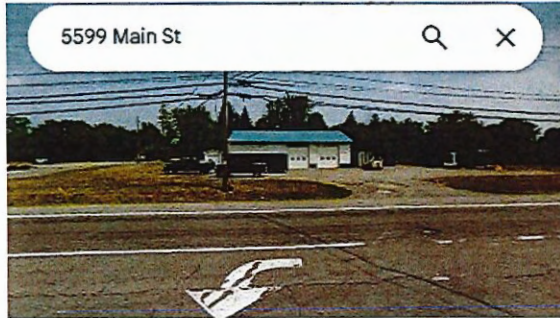
S TOTAL \$ 75.00

Cash:

Check #: 1705

Receipt #:

COPY DISTRIBUTION: White - Z.E.O. Canary - MUNICIPALITY Pink - C.E.O. Gold - APPLICANT



5599 Main St

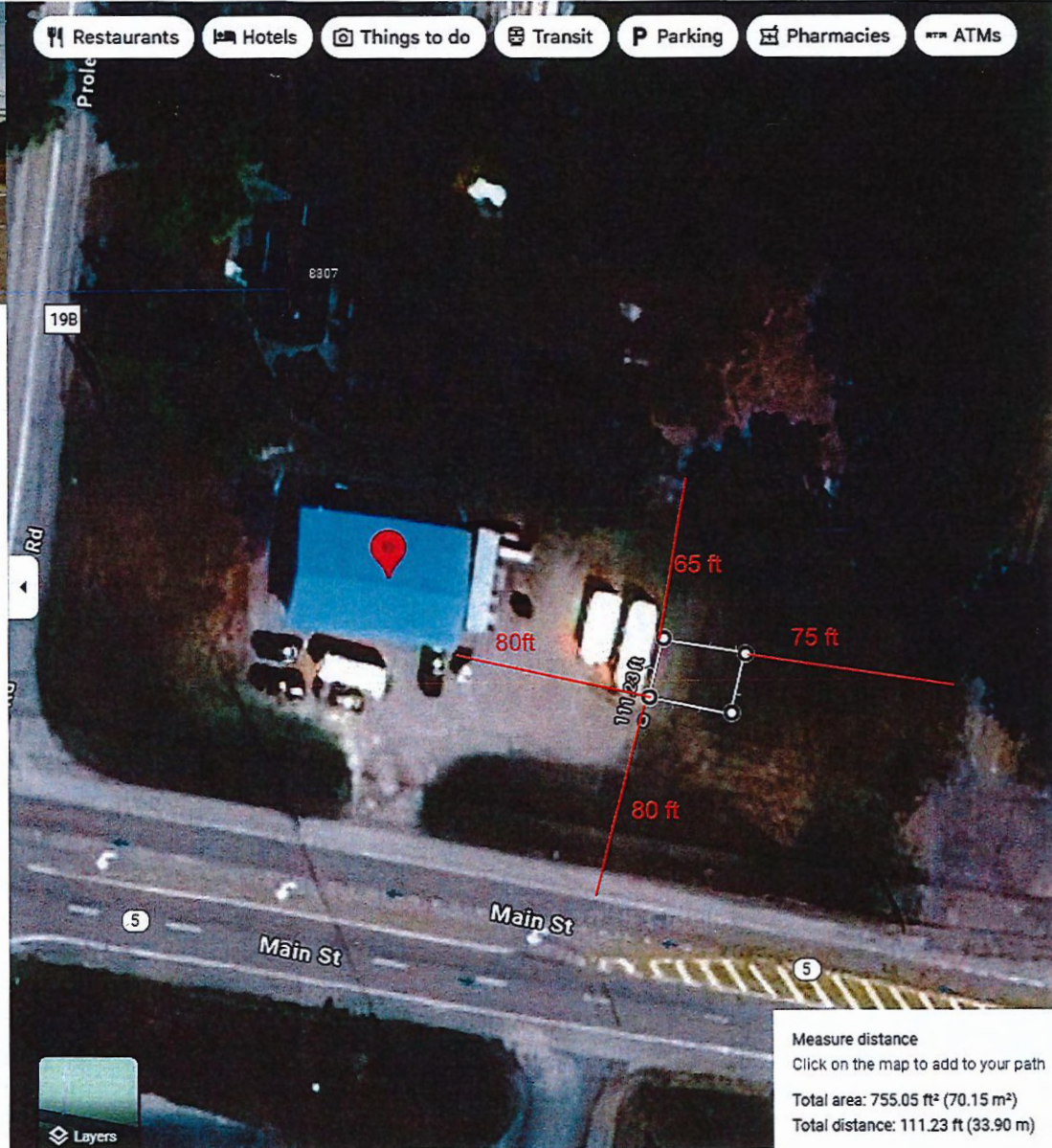
5599 Main St

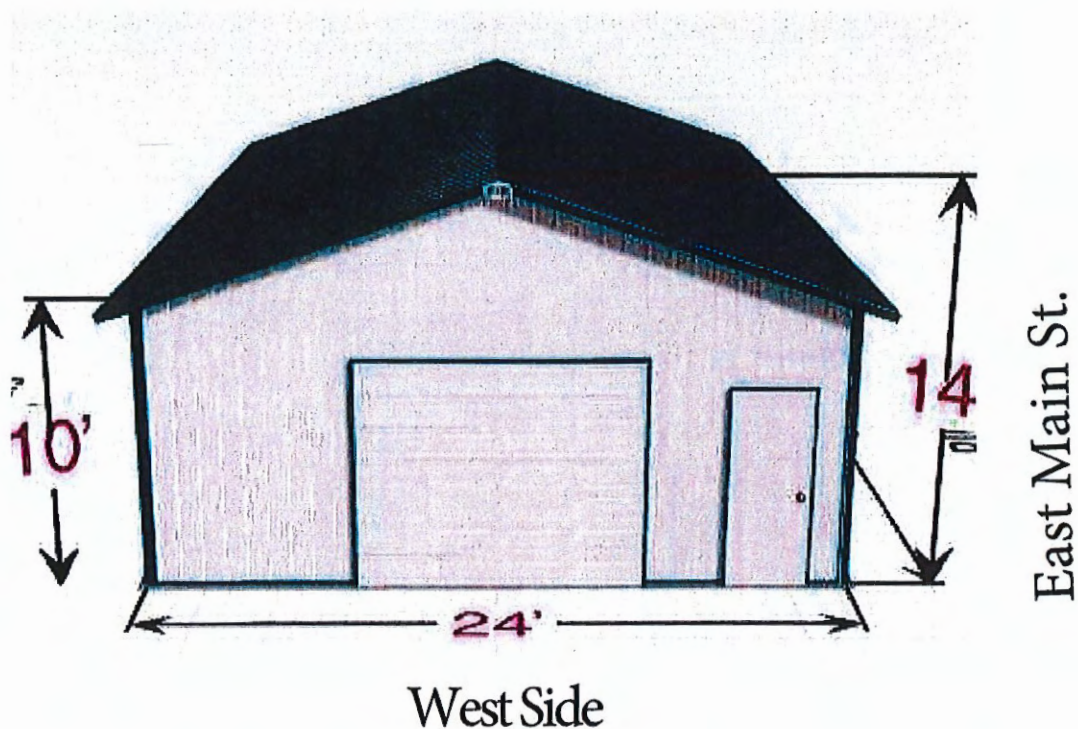
Building

- Directions
- Save
- Nearby
- Send to phone
- Share

- 5599 Main St, Batavia, NY 14020
- Suggest an edit on 5599 Main St
- Add a missing place
- Add your business
- Add a label
- Your Maps activity

Photos





Building Specs

Width: 24'
 Length: 32'
 Height: 10'
 Roof Type: Gabled
 Roof Pitch: 4":12"
 Post Footing: Perma-Column
 Base Trim: Yes

Colors

Roof Color: Regal Blue
 Wall Color: Regal White

Trim Color: Regal Blue
 Soffit: Regal White
 Sliding Door Trim: Regal Blue
 Walk Doors: Regal White
 Large Doors: Regal White
 Track: Regal White

Interior

Walls

Roof Options

Front Endwall Overhang: 1'
 Back Endwall Overhang: 1'
 Left Sidewall Overhang: 1'
 Right Sidewall Overhang: 1'

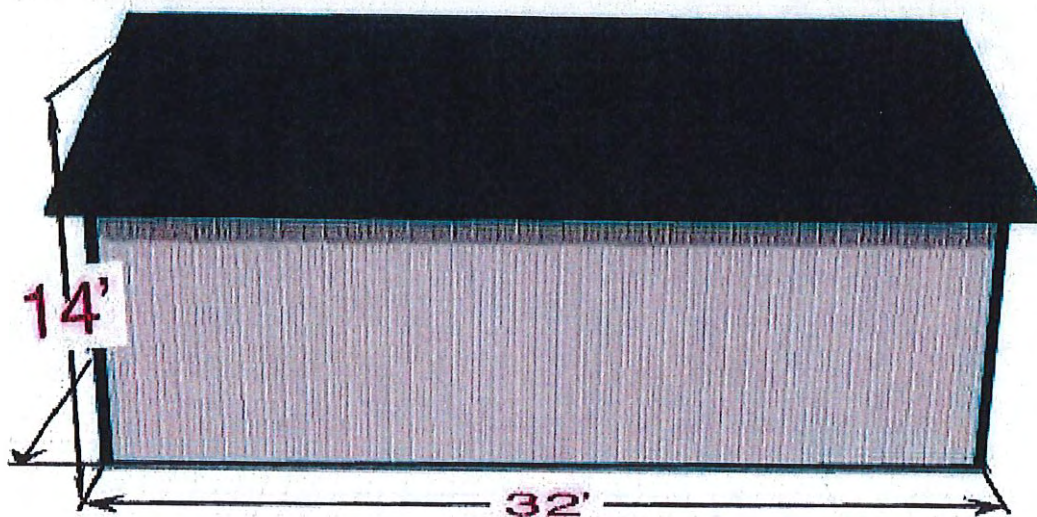
Lean-tos

Windows & Doors

Walk Door Solid Qty: 1
 Overhead Panel Door Qty: 1

Item Sizes:

Walk Door Solid: w3' x h7'
 Overhead Panel Door: w10' x h8'



Front Wall - East Main St. Road

Building Specs

Width: 24'
Length: 32'
Height: 10'
Roof Type: Gabled
Roof Pitch: 4":12"
Post Footing: Perma-Column
Base Trim: Yes

Colors

Roof Color: Regal Blue
Wall Color: Regal White

Front Endwall Overhang: 1'
Back Endwall Overhang: 1'
Left Sidewall Overhang: 1'
Right Sidewall Overhang: 1'

Lean-tos

Windows & Doors

Walk Door Solid Qty: 1
Overhead Panel Door Qty: 1

Item Sizes:

Walk Door Solid: w3' x h7'
Overhead Panel Door: w10' x h8'

Short Environmental Assessment Form

Part 1 - Project Information

Instructions for Completing

Part 1 – Project Information. The applicant or project sponsor is responsible for the completion of Part 1. Responses become part of the application for approval or funding, are subject to public review, and may be subject to further verification. Complete Part 1 based on information currently available. If additional research or investigation would be needed to fully respond to any item, please answer as thoroughly as possible based on current information.

Complete all items in Part 1. You may also provide any additional information which you believe will be needed by or useful to the lead agency; attach additional pages as necessary to supplement any item.

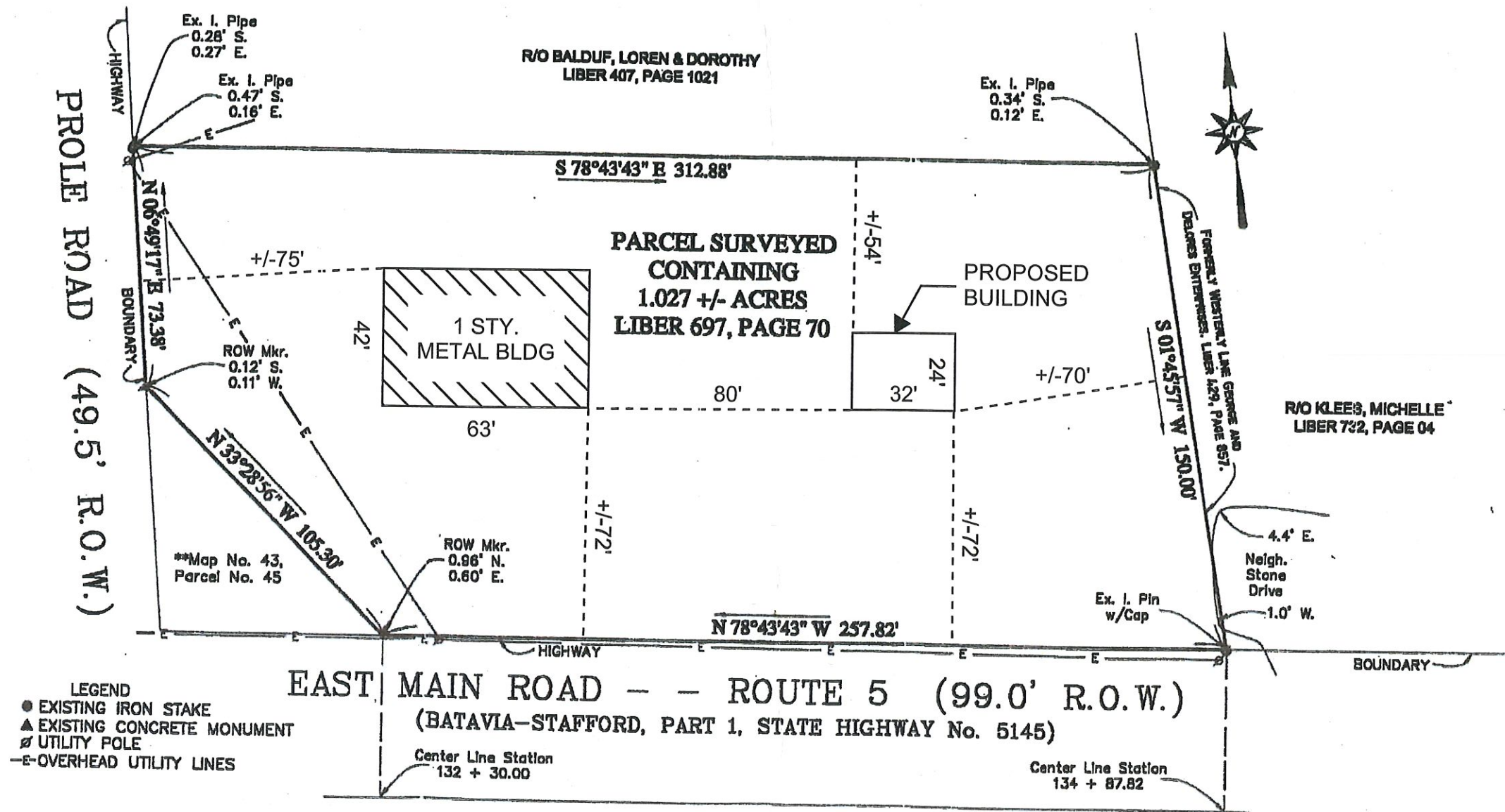
Part 1 – Project and Sponsor Information			
Name of Action or Project: <div style="font-size: 1.2em; font-family: cursive;">STOREAGE BUILDING</div>			
Project Location (describe, and attach a location map): <div style="font-size: 1.2em; font-family: cursive;">5599 EAST MAIN STREET</div>			
Brief Description of Proposed Action: <div style="font-size: 1.2em; font-family: cursive;">DRY STORAGE</div>			
Name of Applicant or Sponsor: <div style="font-size: 1.2em; font-family: cursive;">ROBERT G. MULLEN</div>		Telephone: <div style="font-size: 1.2em; font-family: cursive;">585-409-0100</div>	
		E-Mail: <div style="font-size: 1.2em; font-family: cursive;">ROB@EASTCOASTSPED.COM</div>	
Address: <div style="font-size: 1.2em; font-family: cursive;">9168 BATAVIA STAFFORD TWIN RD</div>			
City/PO: <div style="font-size: 1.2em; font-family: cursive;">BATAVIA</div>		State: <div style="font-size: 1.2em; font-family: cursive;">NY</div>	Zip Code: <div style="font-size: 1.2em; font-family: cursive;">14020</div>
1. Does the proposed action only involve the legislative adoption of a plan, local law, ordinance, administrative rule, or regulation?		NO	YES
If Yes, attach a narrative description of the intent of the proposed action and the environmental resources that may be affected in the municipality and proceed to Part 2. If no, continue to question 2.		<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. Does the proposed action require a permit, approval or funding from any other government Agency?		NO	YES
If Yes, list agency(s) name and permit or approval:		<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. a. Total acreage of the site of the proposed action?		<div style="font-size: 1.2em; font-family: cursive;">768</div> acres <div style="font-size: 1.2em; font-family: cursive;">SF</div>	
b. Total acreage to be physically disturbed?		<div style="font-size: 1.2em; font-family: cursive;">768</div> acres <div style="font-size: 1.2em; font-family: cursive;">SF</div>	
c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor?		<div style="font-size: 1.2em; font-family: cursive;">1</div> acres	
4. Check all land uses that occur on, are adjoining or near the proposed action:			
<div style="display: flex; flex-wrap: wrap;"> <div style="width: 50%;"><input type="checkbox"/> Urban</div> <div style="width: 50%;"><input checked="" type="checkbox"/> Rural (non-agriculture)</div> <div style="width: 50%;"><input type="checkbox"/> Industrial</div> <div style="width: 50%;"><input checked="" type="checkbox"/> Commercial</div> <div style="width: 50%;"><input checked="" type="checkbox"/> Residential (suburban)</div> <div style="width: 50%;"><input type="checkbox"/> Forest</div> <div style="width: 50%;"><input checked="" type="checkbox"/> Agriculture</div> <div style="width: 50%;"><input type="checkbox"/> Aquatic</div> <div style="width: 50%;"><input type="checkbox"/> Other(Specify):</div> <div style="width: 50%;"><input type="checkbox"/> Parkland</div> </div>			

5. Is the proposed action,	NO	YES	N/A
a. A permitted use under the zoning regulations?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Consistent with the adopted comprehensive plan?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Is the proposed action consistent with the predominant character of the existing built or natural landscape?	NO <input type="checkbox"/>	YES <input checked="" type="checkbox"/>	
7. Is the site of the proposed action located in, or does it adjoin, a state listed Critical Environmental Area? If Yes, identify: _____	NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/>	
8. a. Will the proposed action result in a substantial increase in traffic above present levels?	NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/>	
b. Are public transportation services available at or near the site of the proposed action?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
c. Are any pedestrian accommodations or bicycle routes available on or near the site of the proposed action?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
9. Does the proposed action meet or exceed the state energy code requirements? If the proposed action will exceed requirements, describe design features and technologies: <div style="text-align: center;">NA</div>	NO <input type="checkbox"/>	YES <input type="checkbox"/>	
10. Will the proposed action connect to an existing public/private water supply? If No, describe method for providing potable water: _____	NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/>	
11. Will the proposed action connect to existing wastewater utilities? If No, describe method for providing wastewater treatment: _____	NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/>	
12. a. Does the project site contain, or is it substantially contiguous to, a building, archaeological site, or district which is listed on the National or State Register of Historic Places, or that has been determined by the Commissioner of the NYS Office of Parks, Recreation and Historic Preservation to be eligible for listing on the State Register of Historic Places?	NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/>	
b. Is the project site, or any portion of it, located in or adjacent to an area designated as sensitive for archaeological sites on the NY State Historic Preservation Office (SHPO) archaeological site inventory?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
13. a. Does any portion of the site of the proposed action, or lands adjoining the proposed action, contain wetlands or other waterbodies regulated by a federal, state or local agency?	NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/>	
b. Would the proposed action physically alter, or encroach into, any existing wetland or waterbody?	<input type="checkbox"/>	<input type="checkbox"/>	
If Yes, identify the wetland or waterbody and extent of alterations in square feet or acres: _____ _____ _____			

14. Identify the typical habitat types that occur on, or are likely to be found on the project site. Check all that apply: <input type="checkbox"/> Shoreline <input type="checkbox"/> Forest <input type="checkbox"/> Agricultural/grasslands <input type="checkbox"/> Early mid-successional <input type="checkbox"/> Wetland <input type="checkbox"/> Urban <input checked="" type="checkbox"/> Suburban		
15. Does the site of the proposed action contain any species of animal, or associated habitats, listed by the State or Federal government as threatened or endangered?	NO	YES
	<input checked="" type="checkbox"/>	<input type="checkbox"/>
16. Is the project site located in the 100-year flood plan?	NO	YES
	<input checked="" type="checkbox"/>	<input type="checkbox"/>
17. Will the proposed action create storm water discharge, either from point or non-point sources? If Yes,	NO	YES
	<input checked="" type="checkbox"/>	<input type="checkbox"/>
a. Will storm water discharges flow to adjacent properties?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)? If Yes, briefly describe:	<input checked="" type="checkbox"/>	<input type="checkbox"/>
18. Does the proposed action include construction or other activities that would result in the impoundment of water or other liquids (e.g., retention pond, waste lagoon, dam)? If Yes, explain the purpose and size of the impoundment:	NO	YES
	<input checked="" type="checkbox"/>	<input type="checkbox"/>
19. Has the site of the proposed action or an adjoining property been the location of an active or closed solid waste management facility? If Yes, describe:	NO	YES
	<input checked="" type="checkbox"/>	<input type="checkbox"/>
20. Has the site of the proposed action or an adjoining property been the subject of remediation (ongoing or completed) for hazardous waste? If Yes, describe:	NO	YES
	<input checked="" type="checkbox"/>	<input type="checkbox"/>
I CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE		
Applicant/sponsor/name: <u>ROBERT C MULLEN</u> Date: <u>11/3/2025</u>		
Signature: <u>[Signature]</u> Title: <u>OWNER</u>		

"UNAUTHORIZED ALTERATION OR ADDITIONS TO A SURVEY MAP BEARING A LICENSED LAND SURVEYOR'S SEAL IS A VIOLATION OF SECTION 7209, SUB-DIVISION 2, OF THE NEW YORK STATE EDUCATION LAW."

"ONLY COPIES FROM THE ORIGINAL OF THIS SURVEY MARKED WITH AN ORIGINAL OF THE LAND SURVEYOR'S EMBOSSED SEAL SHALL BE CONSIDERED TO BE VALID TRUE COPIES."



REFERENCE

**APPROPRIATION OF LANDS BY THE PEOPLE OF THE STATE OF NEW YORK, BATAVIA-STAFFORD, PART 1, S.H. No. 5145, MAP NO. 43, PARCEL NO. 45.

NOTE:

SURVEY INFORMATION SHOWN ON THIS MAP WAS TAKEN FROM A SURVEY COMPLETED BY DAVID S. LAMENDOLA, DATED NOVEMBER 3, 2000, JOB NO. 00-208.

PROPOSED BUILDING LOCATION SKETCH

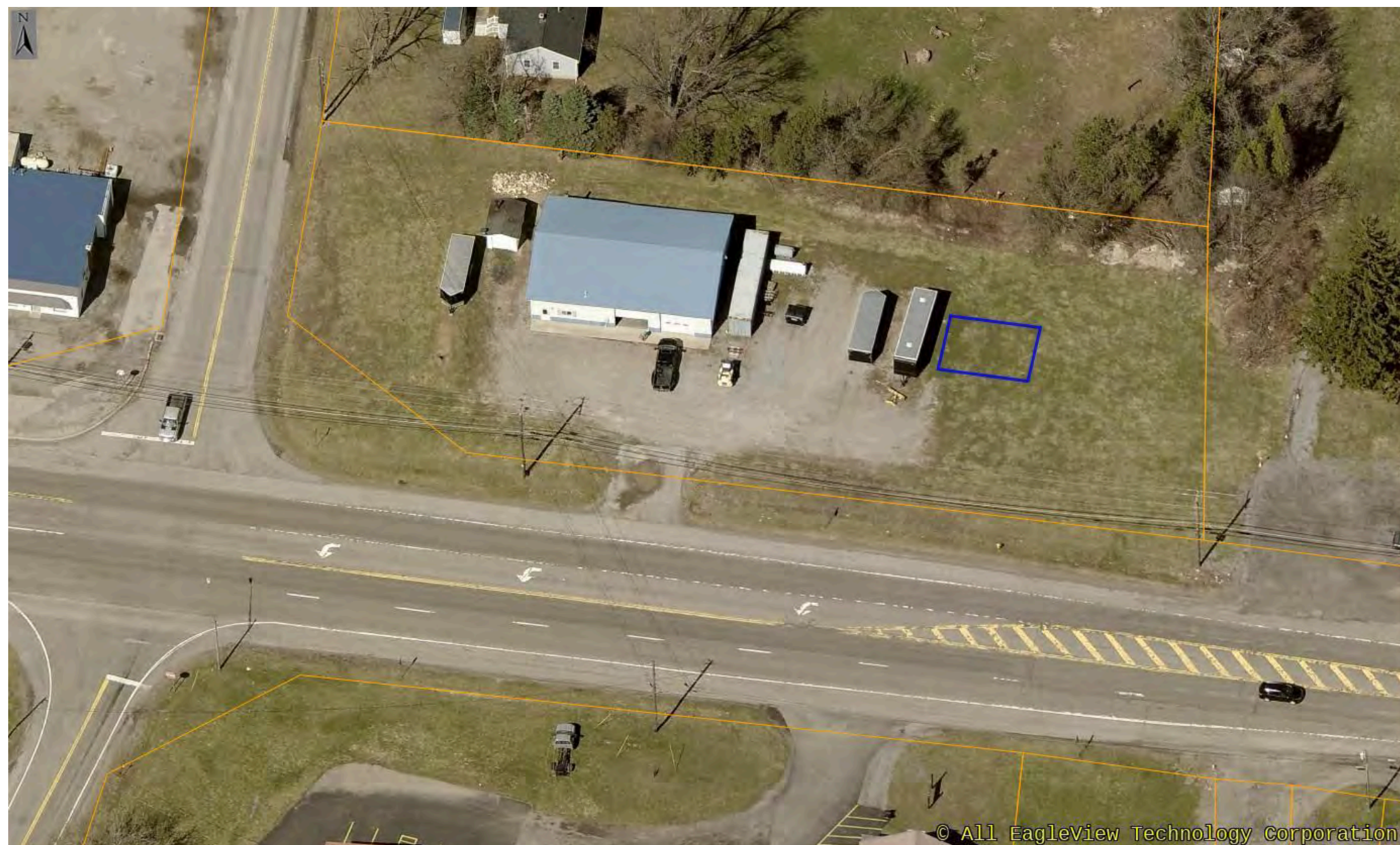
5599 MAIN STREET

TOWN	STAFFORD	COUNTY	GENESEE, NY
PROJ. No.	25-000	SCALE	1"=40'
CREW	-	DWN.	-
SKETCH NO.	1 OF 1	CHK.	-
DATE	10/27/2025		



PO Box 207
Sanborn, New York 14132
PHONE: (716) 587-8380
FAX: 716.587.8379
WEBSITE: www.360landsurvey.com

T-01-STA-11-25



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04/04/2025